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SERIAL NUMBER 10/516,858	FILING OR 371(c) DATE 07/21/2005 RULE	CLASS 436	GROUP ART UNIT 1743	ATTORNEY DOCKET NO. C2432.0060
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/SE03/00973 06/12/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

SWEDEN 0201922-2 06/20/2002

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SWEDEN	SHEETS DRAWING	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Initials: <i>haw</i>				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

32172

**TITLE**

Anticoagulant composition

FILING FEE RECEIVED 647	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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